

State of Arkansas  
95th General Assembly  
Regular Session, 2025

# A Bill

HOUSE BILL 1943

By: Representative L. Johnson  
By: Senator B. Davis

## For An Act To Be Entitled

AN ACT TO AMEND THE MEDICAID PROVIDER-LED ORGANIZED  
CARE ACT; TO IMPROVE THE ENROLLMENT AND SELECTION  
PROCESS IN RISK-BASED PROVIDER ORGANIZATIONS; TO  
EMPOWER MEDICAID BENEFICIARIES WITH USEFUL  
INFORMATION ABOUT RISK-BASED PROVIDER ORGANIZATIONS  
AVAILABLE TO THEM; AND FOR OTHER PURPOSES.

## Subtitle

TO AMEND THE MEDICAID PROVIDER-LED  
ORGANIZED CARE ACT; TO IMPROVE THE  
ENROLLMENT AND SELECTION PROCESS IN  
RISK-BASED PROVIDER ORGANIZATIONS; AND  
TO EMPOWER BENEFICIARIES WITH  
INFORMATION.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code Title 20, Chapter 77, Subchapter 27, is  
amended to add additional sections to read as follows:

20-77-2709. Quality rating system.

(a) The risk-based provider organizations shall have a basic quality  
rating system that is accessible online that includes ratings for each risk-  
based provider organization based on data that includes at a minimum the  
following measures that are currently collected by the risk-based provider  
organization:

(1) The number of days before initial delivery of home- and  
community-based services for individuals who have received a waiver slot in



1 the Community and Employment Support Waiver;

2 (2) The care coordinator caseload ratios;

3 (3) The scores of a satisfaction survey of members of the risk-  
4 based provider organization that includes at least the following:

5 (A) The satisfaction of individuals assessed with  
6 intellectual and developmental disabilities with their level of integration  
7 into the community;

8 (B) The satisfaction of individuals assessed with  
9 intellectual and developmental disabilities who report satisfaction with  
10 their living arrangements;

11 (C) The numbers and percentages of enrollees assessed with  
12 intellectual and developmental disabilities who are engaged in meaningful,  
13 competitive employment;

14 (D) The satisfaction with care coordinators by individuals  
15 assessed with intellectual and developmental disabilities and by intellectual  
16 and developmental disabilities service providers;

17 (E) The satisfaction with care coordinators by individuals  
18 assessed with behavioral health needs and by behavioral health providers;

19 (F) The satisfaction with the website or portal of the  
20 risk-based provider organizations by individuals assessed with intellectual  
21 and developmental disabilities and by intellectual and developmental  
22 disabilities service providers;

23 (G) The satisfaction with the website or portal of the  
24 risk-based provider organizations by individuals assessed with behavioral  
25 health needs and by behavioral health providers;

26 (H) The overall satisfaction with the risk-based provider  
27 organization by individuals assessed with intellectual and developmental  
28 disabilities and by intellectual and developmental disabilities service  
29 providers; and

30 (I) The overall satisfaction with the risk-based provider  
31 organization by individuals assessed with behavioral health needs and by  
32 behavioral health providers;

33 (4) The percentage of individuals assessed with intellectual and  
34 developmental disabilities who receive follow-up care after an emergency  
35 department visit within seven (7) days;

36 (5) The percentage of individuals assessed with behavioral

1 health needs who receive follow-up care after an emergency department visit  
2 within seven (7) days;

3 (6) The percentage of members between three (3) years age and  
4 twenty-one (21) years of age who had at least one (1) comprehensive well-care  
5 visit with a primary care provider or an obstetrician-gynecologist  
6 practitioner during the measurement year;

7 (7) The percentage of newly enrolled members who receive an  
8 initial contact with a care coordinator within fourteen (14) days;

9 (8) The percentage of enrolled members who receive monthly  
10 contact with a care coordinator; and

11 (9) The incidence of enrollee complaints or grievances.

12 (b) The ratings shall be prominently displayed on the website of  
13 Department of Human Services for risk-based provider organizations.

14  
15 20-77-2710. Provider directories.

16 (a) Each risk-based provider organization shall provide to enrollees  
17 real-time access to its provider network directory through a link on the  
18 website of Department of Human Services and on the website of the risk-based  
19 provider organization.

20 (b) The risk-based provider organizations shall ensure that the  
21 provider directories are updated for the upcoming plan year so that enrollees  
22 can make informed decisions.

23 (c) When an existing network provider's status has or will change to  
24 out-of-network, the risk-based provider organization shall make that change  
25 in the provider directory within ten (10) business days of the change being  
26 communicated to or from the risk-based provider organization.

27  
28 20-77-2711. Beneficiary support office.

29 (a) The Department of Human Services shall have a dedicated  
30 beneficiary support system that is adequately staffed and trained to meet the  
31 requirements of 42 C.F.R. § 438.71, as existing on January 1, 2025.

32 (b) Enrollees and other members of the public shall be able to easily  
33 contact the department for information about the risk-based provider  
34 organization, including open enrollment, choice counseling, updated  
35 information on provider networks, assistance in understanding how to use the  
36 quality rating system to select a plan, and other pertinent information.

1        (c) The ombudsman shall also have the authority to help enrollees  
2 informally resolve issues between enrollees and risk-based provider  
3 organizations.

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5        SECTION 2. DO NOT CODIFY. Rules.

6        The Department of Human Services may promulgate rules to implement this  
7 act.

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9        SECTION 3. EFFECTIVE DATE.

10       This act shall be effective on January 1, 2026.

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13                    **APPROVED: 4/21/25**  
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